					سجست					-	
Application of Docket Number									nber		
Effective December 29, 1999											
17		CLAIMS A	S FILED - column 1)	- SMA	LL ENTITY	OR	OTHER SMALL:				
FOR NUMBER FILED NUMBER				EXTRA	RAT	E FEE	7	RATE	FEE		
							345.00	OR		690.00	
TOTAL CLAIMS: 7 minus 20= •				50= .	, , , , , , , , , , , , , , , , , , ,	X\$ 9	=	OR	X\$18=	-	
INDEPENDENT CLAIMS 2 minus 3 = *					X39		OR	X78=	••		
MULTIPLE DEPENDENT CLAIM PRESENT						+130)a	OR	+260=		
- H	the difference	TOTA	VL.	OR	TOTAL	1040					
CHAIMS AS AMENDED - PART II						SMA	LL ENTITY		OTHER		
		(Column 1)	The Assessment Property	(Column 2) HIGHEST	(Column 3)	200		- 00	OIIIAGE.		
ENT A		REMAINING AFTER AMENDMENT		MUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT	E TIONAL FEE	_	RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	: 5	Minus	-20	=	X\$ 9	8	OR	X\$18=		
	independent	. 2	Minus	~ (V	•	X39		OR	X78=	·	
	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDENT CLAIM		120		٦	+260=		
		ر ر	1.11	λ		+130		OR	TOTAL	· · · · ·	
	L CLAMAS						ADDIT. FEE OR ADDIT. FEE				
Column 2) (Column 3)									•		
ENT 8	nese.	REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT	ADDI- E TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDWENT	Total Mark	. 191	Minus	· XU	•	X\$ 8	-	OR	X\$18=	8	
AME	Independent	• 4	Minus	PENDENT CLAIM	- 1	X39-		OR	X78=		
	rino) rhese	MINITON ON M	OLITE DE	ENDENT PLAIM		+130		OR	+260=		
ł				*	.41	ADDIT. F		OR	YOYAL ADDIT, FEE		
(Column 1) (Column 2) (Column 3)											
	· 3. #1- UL	- CLAIMS		HIGHEST			ADDI-	7		ADDI-	
AMENDMENT C	45: 11.3	REMAINING AFTER AMENDMENT		PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE			RATE	TIONAL	
Ş	Total	. 15,	Minus	.50	9	X\$ 9	•	OR	X\$18=	a.	
	Independent	• 4	Minus	3	· /	X39=		OR	X78=	5400	
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDENT CLAIM		-		104			
		in 4 In last than t	no ontre la serie	+130	i	OR	+260=				
1 Well the William Street Stre										84.5	
The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The Thighest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

FORM PTO-67

Petent and Tradomark Office, U.S. DEPARTMENT OF COMMERCE